ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):					FOR COURT USE ONLY
	т.	El EDL'	ONE N	O.: FAX NO.:	
_	TORN	EY FO	R (Nam	e):	
				DURT OF CALIFORNIA, COUNTY OF SAN DIEGO	
				LEY BLDG., 1409 4TH AVE., SAN DIEGO, CA 92101-3105 ITY DIVISION, 325 S. MELROSE DR., VISTA, CA 92083-6698	
GI	JARE	DIANS	SHIP (OF THE □ PERSON □ ESTATE OF	
H.	200	OF (<u> </u>	MINOR(S)	CASE NUMBER
Ľ	PRO	OF (JF P	PERSONAL OR ACKNOWLEDGED SERVICE (GUARDIANSHIP) (Probate Code § 1511)	
ı					. declare that:
At the time of service I was at least 18 years of age and not a party to this case.					,
2. I am a resident of or employed in the county where the mailing occurred, if service was by mail.				rice was by mail.	
3.	Му	bus	ines	s or residence address is:	
4.	I served copies of the following paper(s) in the manner shown:				
☐ Petition for Appointment of Guardian of Minor					
☐ Attachment(s) included (list):☐ Notice of Hearing (Guardianship)					
		Otl	ner (I	ist exact titles of paper(s)):	
_					
5.	a.			service: rsonal Service. I personally delivered these papers to:	
			(1)	Name of person served:	
			(2)	Address where served:	
			(3)	Date served: Time served:	
	b.		-	mailing copies by first class mail, postage prepaid, along with two coceipt and a self-addressed, stamped envelope to:	opies of a Notice and Acknowledgment of
			(1)	Name of person served:	
			(2)	Address to which mailed:	
			(3)	Date documents were mailed:	
			(4)	City and state where mailing occurred:	
			(5)	The completed Notice and Acknowledgment of Receipt is attached	d.
Ιd	ecla	re ur	nder	penalty of perjury under the laws of the State of California that the f	oregoing is true and correct.
D٥	ıte.				
٥٥					(Signature)